

3-28-06

PATENT
671302-2002

THU



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Toshiyuki Takai

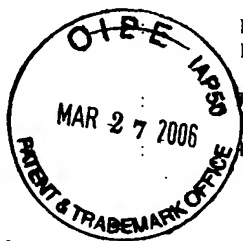
Serial No. 10/712,118

Filed: November 13, 2003

For: NON-HUMAN ANIMAL MODEL OF OLIGODENDROCYTE
DEVELOPMENTAL DISORDER

Examiner: Joanne Hama, Ph.D.

Art Unit: 632

745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	7	Minus	** = 20	*0x	\$50 (25)	=\$0
Independent claims	1	Minus	*** = 3	*0x	\$200 (100)	=\$0
Total additional fee for this amendment						\$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

☐ This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid ☐ or is paid herewith ☐.

☐ This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.

☐ A check in the amount of \$ ___ is attached, which covers the cost of ☒ additional claims ☐ petition for extension of time.

☐ Charge \$ ___ to Deposit Account No. 50-0320.

☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

EXPRESS MAIL

Mailing Label Number: EV 713813121 US

Date of Deposit: March 27, 2006

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Adam Ahmed

(Typed or printed name of person mailing paper or fee)

A. Ahmed

(Signature of person mailing paper or fee)

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicants

By:

Deborah L. Lu

Thomas J. Kowalski, Reg. No. 32,147

Deborah L. Lu, Reg. No. 50,940

Tel: 212-588-0800



PATENT
671302-2002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Toshiyuki TAKAI et al.
Serial No. : 10/712,118
For : NON-HUMAN ANIMAL MODEL OF
OLIGODENDROCYTE DEVELOPMENTAL DISORDER
Filed : NOVEMBER 13, 2003
Examiner : JOANNE HAMA, Ph.D.
Art Unit : 1632

745 Fifth Avenue
New York, NY 10151

EXPRESS MAIL

Mailing Label Number: EV 713813121 US

Date of Deposit: March 27, 2006

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

Adam Ahmed
(Typed or printed name of person mailing paper or fee)

A. Ahmed
(Signature of person mailing paper or fee)

**AMENDMENT AND RESPONSE TO OFFICE ACTION
UNDER 37 C.F.R. § 1.111 AND REQUEST FOR INTERVIEW**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is in response to the December 30, 2005 Office Action, which set a three month period for reply, i.e. up to and including March 30, 2006. No fee is believed to be due with this submission. However, the Commissioner is authorized to charge any additional required fee for this extension of time or any other fee occasioned by this paper, or credit any overpayment in such fees, to Deposit Account No. 50-0320.